

FOR DEPARTMENT USE ONLY

Application No. G(____) _____

SUPPLEMENT TO APPLICATION TO CHANGE A WATER RIGHT

Criteria for Issuance of Authorization to Change

Section 85-2-402(2), MCA, provides the Department shall approve a change in appropriation right if the appropriator proves by a preponderance of evidence the following criteria are met. It is the applicant's responsibility to provide credible, relevant, and factual information upon which the Department may rely to support the issuance of a change authorization. Your application will not be processed until this supplement is completed.

- A. Provide substantial, credible information proving the proposed change will not adversely affect the use of existing water rights of other persons or other planned uses or developments for which a permit has been issued or for which water has been reserved.

- B. Describe the proposed means of diversion, construction, and operation of the diversion works you intend to use and provide substantial, credible information proving the diversion, construction and operation are adequate.

- C. Provide substantial, credible information proving the proposed change is a beneficial use of water.

NOTICE

Additional information is required if the proposed change in purpose of use or place of use involves 4,000 acre-feet or more and 5.5 cubic feet per second or more of water per year or if the proposed change is for withdrawal and transportation for use outside the state.



APPLICATION TO CHANGE A WATER RIGHT

INSTRUCTIONS

Use this form to apply to change the point of diversion, place of use, purpose of use, or place of storage of your water right. Complete the application addendum to substantiate the criteria for issuance of an authorization is met according to 85-2-402 MCA.

Submit the completed application with the proper filing fee, payable to DNRC, to the appropriate Water Resources Regional Office listed on the back page. The estimated processing time after an application is correct and complete is 210 days.

Filing Fee: Replacement Wells or Reservoirs: \$25.00
All Others: \$200.00

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Application No. _____
Date Received _____
Time _____ AM / PM
Rec'd By _____
Fee Rec'd \$ _____
Check No. _____
Refund _____ Date _____

1. **WATER RIGHT OWNER** _____
Mailing address _____
City _____ State _____ Zip _____
Home phone _____ Other phone _____

2. **WATER RIGHT TO BE CHANGED** (Check the appropriate box, provide the water right number, and attach a copy of the water right.)
- ☐ (W) Statement of Claim No(s). _____
- ☐ (E) Exempt Existing Water Right No(s) _____
(Groundwater or instream domestic or stock uses where no Statement of Claim was filed.)
***If you have not filed your exempt water right, complete a Notice of Water Right, form 627, using historic information and attach to this form. (No filing fee for Form 627 is required).
- ☐ (D) Powder River Decree No(s). _____
- ☐ (P) Permit to Appropriate Water No(s). _____
- ☐ (C) Certificate of Water Right No(s). _____
- ☐ (M) Reservation of Water No(s). _____

3. **AMOUNT OF WATER TO BE CHANGED**

_____ up to _____ per year
gal./min. (gpm) or cubic feet/sec. (cfs) acre-feet

MONTANA DEPARTMENT OF NATURAL RESOURCES AND CONSERVATION

48 N. LAST CHANCE GULCH P.O. BOX 201601 HELENA, MT 59620-1601 406-444-6610

WEBSITE: <http://www.dnrc.state.mt.us/wrd/home.htm>



4. **TYPE OF PROPOSED CHANGE** Complete **ONLY** the type of change you are proposing. Multiple changes of one right or identical changes of more than one right may be applied for on one application.

A. Change in POINT OF DIVERSION

- 1) Location of proposed point of diversion

____ 1/4 ____ 1/4 ____ 1/4 Section ____ Township ____ N/S Range ____ E/W County ____

Government Lot ____ or Lot ____ Block ____ Subdivision Name ____

____ 1/4 ____ 1/4 ____ 1/4 Section ____ Township ____ N/S Range ____ E/W County ____

Government Lot ____ or Lot ____ Block ____ Subdivision Name ____

- 2) Is the new point of diversion ☐ in addition to the old point of diversion
or
☐ replacing the old point of diversion

- 3) Source of water if changed _____

- 4) Means of diversion if changed _____

- 5) If a well is involved indicate the well depths: old well _____ ft. new/proposed well _____ ft.

- 6) New well is located approximately _____ feet _____ of old well.
(direction)

B. Change in PLACE OF USE

- 1) Describe where you propose to use the water right. For irrigation show the number of acres for each description.

County _____ Subdivision Name _____

____ Acres Lot ____ Block ____ ____ 1/4 ____ 1/4 ____ 1/4 Section ____ T ____ N/S R ____ E/W

____ Acres Lot ____ Block ____ ____ 1/4 ____ 1/4 ____ 1/4 Section ____ T ____ N/S R ____ E/W

____ Acres Lot ____ Block ____ ____ 1/4 ____ 1/4 ____ 1/4 Section ____ T ____ N/S R ____ E/W

____ Acres Lot ____ Block ____ ____ 1/4 ____ 1/4 ____ 1/4 Section ____ T ____ N/S R ____ E/W

____ Acres Lot ____ Block ____ ____ 1/4 ____ 1/4 ____ 1/4 Section ____ T ____ N/S R ____ E/W

____ Acres Lot ____ Block ____ ____ 1/4 ____ 1/4 ____ 1/4 Section ____ T ____ N/S R ____ E/W

____ Total Acres

- 2) If some acres will be taken out of irrigation, identify those acres by location which will no longer be irrigated by this water right.

County _____ Subdivision Name _____

____ Acres Lot ____ Block ____ ____ 1/4 ____ 1/4 ____ 1/4 Section ____ T ____ N/S R ____ E/W

____ Acres Lot ____ Block ____ ____ 1/4 ____ 1/4 ____ 1/4 Section ____ T ____ N/S R ____ E/W

____ Acres Lot ____ Block ____ ____ 1/4 ____ 1/4 ____ 1/4 Section ____ T ____ N/S R ____ E/W

____ Acres Lot ____ Block ____ ____ 1/4 ____ 1/4 ____ 1/4 Section ____ T ____ N/S R ____ E/W

____ Acres Lot ____ Block ____ ____ 1/4 ____ 1/4 ____ 1/4 Section ____ T ____ N/S R ____ E/W

____ Acres Lot ____ Block ____ ____ 1/4 ____ 1/4 ____ 1/4 Section ____ T ____ N/S R ____ E/W

____ Total Acres

C. Change in PURPOSE OF USE

- 1) Proposed Use: _____

Rate _____ gpm or cfs Volume _____ acre-feet

Period of Use _____ to _____
month/day month/day

D. Change in PLACE OF STORAGE

1) Location of Proposed Place of Storage

_____ 1/4 _____ 1/4 _____ 1/4 Section _____ Township _____ N/S Range _____ E/W County _____

2) Period of Appropriation _____ to _____
month/day month/day

3) Capacity of Proposed Storage Facility _____ acre-feet

5. COMPLETION SCHEDULE Estimate how long it will take to complete the change after the Authorization is granted. _____
months or years

(COMPLETE means the change is finished, developed, or constructed as authorized.)

What factors were considered in determining this time schedule?

6. LOCATION MAP (Must be included)

Attach a map and show the existing system and the changed system as proposed. An ASCS aerial photo or USGS topographic map may be used. Failure to supply an accurate map constitutes an incomplete application and the application will be terminated. Show the following items.

- | | |
|--|---|
| a. Township and range numbers | d. Location of conveyance ditch, pipelines, etc. |
| b. Section corners and numbers | e. Place(s) of use — past and proposed (irrigated acres, location of stock tanks) |
| c. Point(s) of diversion — past and proposed | f. Place of storage — past and proposed |

7. CHANGE DESCRIPTION

Describe how and why you are changing your water right: _____

8. WATER MEASUREMENT

Describe your plans, if any, for measuring your water use: _____

9. CONTACT PERSON

If the contact person is identified as legal counsel, all communications will be sent only to the attorney, unless otherwise instructed.

OR

If a contact person, such as a consultant, employee or lessee is provided, the applicant will receive all correspondence with a copy sent to the contact person.

Name of Contact _____ Title _____

Address _____

City/State/Zip _____ Phone _____

E-mail address _____

10. AFFIDAVIT

I affirm that statements appearing here are to the best of my knowledge true and correct. I also affirm I have possessory interest, or the written consent of the person with the possessory interest, in the property where the water is to be put to beneficial use.

Applicant's Signature _____ Date _____

_____ Date _____

Subscribed and sworn before me this _____ day of _____



Notary's Signature _____

Notary for the State of _____

Residing at _____

My commission expires _____

WATER RESOURCES REGIONAL OFFICES

Billings

1371 Rimtop Drive
Billings, MT 59105-1978
Phone: 406-247-4415
Fax: 406-245-2064
Serving: Big Horn, Carbon, Carter
Custer, Fallon, Powder River, Prairie,
Rosebud, Stillwater, Sweet Grass,
Treasure, and Yellowstone Counties

Havre

210 6th Avenue
P.O. Box 1828
Havre, MT 59501-1828
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Fax: 406-265-2225
Serving: Blaine, Chouteau,
Glacier, Hill, Liberty, Pondera,
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Lewistown, MT 59457-2020
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Fax: 406-538-7089
Serving: Cascade, Fergus, Golden
Valley, Judith Basin, Meagher,
Musselshell, Petroleum, and
Wheatland Counties

Bozeman

2273 Boot Hill Court, Ste 110
Bozeman, MT 59715
Phone: 406-586-3136
Fax: 406-587-9726
Serving: Gallatin, Madison, and
Park Counties

Helena

1424 9th Ave
P.O. Box 201601
Helena, MT 59620-1601
Phone: 406-444-6999
Fax: 406-444-9317
Serving: Beaverhead, Broadwater,
Deer Lodge, Jefferson, Lewis and
Clark, Powell, and Silver Bow Counties

Missoula

Town and Country Shopping Center
1610 South 3rd Street West, Suite 103
P.O. Box 5004
Missoula, MT 59806-5004
Phone: 406-721-4284
Fax: 406-542-1496
Serving: Granite, Mineral,
Missoula, and Ravalli Counties

Glasgow

222 6th Street South
P.O. Box 1269
Glasgow, MT 59230-1269
Phone: 406-228-2561
Fax: 406-228-8706
Serving: Daniels, Dawson, Garfield,
McCone, Phillips, Richland,
Roosevelt, Sheridan, Valley, and
Wibaux Counties

Kalispell

109 Cooperative Way, Suite 110
Kalispell, MT 59901-2387
Phone: 406-752-2288
Fax: 406-752-2843
Serving: Flathead, Lake, Lincoln,
and Sanders Counties

For Mailing, Use Post Office Box Number.

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1424 9TH AVE., P.O. BOX 201601 HELENA, MT 59620-1601 444-6999

WEBSITE <http://www.dnrc.mt.state.us/wrd/home.htm>

